

Beth Israel Lahey Health Beth Israel Deaconess Medical Center

# Harvard Medical School

# **Research Fellowship Program**

# in Integrative Medicine

Participating Institutions:

- Beth Israel Deaconess Medical Center
- Brigham and Women's Hospital
- Harvard Medical School
- Harvard School of Public Health
- Massachusetts General Hospital
- Cambridge Health Alliance
- Dana-Farber Cancer Institute
- Spaulding Rehabilitation Network

The Research Fellowship Program in Integrative Medicine at Harvard Medical School accepts MD. PhD. and other post-doctoral applicants for three-year academic fellowships in Integrative Medicine. Areas of special interest within Integrative Medicine include mind-body therapies and placebo studies. Other areas of focus and faculty expertise include chronic disease management, cardiometabolic disease, cardiac and pulmonary health, musculoskeletal health, neurocognition, positive behavior change, and healthy aging. The Program offers each Fellow an appointment at Harvard Medical School and one or more of its affiliated hospitals. All fellows participate in the intensive summer program in Clinical Effectiveness at the Harvard School of Public Health. Appropriate fellows qualifying for acceptance to the Harvard T.H. Chan School of Public Health pursue a rigorous curriculum that could lead to a Master of Public Health degree. The Program also includes structured experiences to improve teaching skills and supervised clinical activities under the direction of experienced faculty in general internal medicine and integrative medical therapies. Each Fellow is expected to design, conduct, present, and publish at least two original investigative projects. This research fellowship in Integrative Medicine was first funded in 1999 by the National Institutes of Health, National Center for Complementary and Alternative Medicine, and was the first of its kind in the United States. The Program is based at Beth Israel Deaconess Medical Center within the Division of General Medicine and Primary Care, with several affiliate sites across Harvard. The Program is also affiliated with the Osher Center for Integrative Medicine at Harvard Medical School and Brigham and Women's Hospital.

#### THE ACADEMIC CURRICULUM:

The program begins each July with a seven-week summer core curriculum taught by faculty at the Harvard T.H. Chan School of Public Health (Summer Program in Clinical Effectiveness). The 15credit core curriculum includes required courses in biostatistics, epidemiology, and elective courses in health policy, health services research, decision sciences, quality improvement, public health ethics, and clinical trials. The intensive summer experience includes about six hours per day of classroom time and about four hours per night of assignments, including two required class presentations.

After completion of the summer core curriculum, some fellows continue to take advanced courses at the Harvard T.H. Chan School of Public Health and, upon earning 45 academic credits, can obtain a Master of Public Health degree. Although the degree itself may be optional, fellows are strongly encouraged to take specific advanced course work that will help develop the investigative skills required for their original research projects.

#### **FELLOWSHIP SEMINARS:**

Fellows also attend weekly seminars or research conferences addressing current research in integrative medicine, applied research methodology, critical appraisal of the scientific literature, and a core curriculum for basic competency in the field of integrative medicine. Weekly seminars provide a forum to present and discuss fellows' ongoing research, and provide opportunities for academic and career mentorship.

#### **CLINICAL OPPORTUNITIES:**

Beginning in the fall of the first fellowship year, clinical fellows (e.g., physicians, clinical psychologists) provide care for patients at an affiliated clinical site. integrative care or primary care practice site. Fellows have opportunities to work with complementary medicine providers and/or observing their practices. Non-clinical fellows (e.g., non-clinical PhDs, basic scientists) also have opportunities to shadow and observe clinical practice to gain a better understanding of integrative care and to inform research interests.

The Osher Clinical Center at Brigham and Women's hospital serves patients with a variety of chronic and pain related conditions and operates as a model of integration with the entire hospital system. All visit and consultation notes are entered on the hospital-wide electronic medical record for maximum collaboration and communication with a patient's other health care providers. Additional clinical opportunities, both conventional and integrative medicine, may be available at other affiliated sites, or through individual study through extracurricular training.

#### THE RESEARCH PROGRAM:

Each fellow works in close collaboration with a faculty mentor and initiates a research project during the first year of the fellowship. The project will focus on integrative medicine and may include any of a number of methodologies and topics: clinical epidemiology, clinical trials, decision analysis, patient outcomes, health services research, health policy, practice variation, technology assessment, access and equity in health care, education, quality improvement, disease prevention, health promotion, ethics, informatics, basic science, and translational research. Fellows present their plans and research in progress at seminars within the program. They are encouraged and expected to present their findings at appropriate regional and national meetings of organizations such as the Academic Consortium for Integrative Medicine & Health, Society of General Internal Medicine, Society of Behavioral Medicine, American Public Health Association, or other health specialty organizations (e.g., the American College of Cardiology, Society of Integrative Oncology, Society of Acupuncture Research).

#### STRUCTURE OF THE PROGRAM:

The Program is administered by the Harvard Medical School through the Division of General Medicine at Beth Israel Deaconess Medical Center which maintains formal connections with the participating clinical sites. The Program is also closely affiliated with the Osher Center for Integrative Medicine jointly based at Harvard Medical School and Brigham and Women's Hospital. The clinical sites serve as a natural laboratory for the clinical investigation and/or educational projects of the Fellow. Fellows based at participating sites will have primary faculty mentorship at this site. However, the full resources of the entire program are available to all fellows at all clinical sites.

The Program emphasizes research and prepare fellows for academic careers in integrative medicine, although fellows also receive training in teaching and clinician trainees have the opportunity to further develop or learn new patient care skills in integrative medicine. Fellows receive personalized supervision in the development, design, and implementation of research projects, data management and analysis, preparation of manuscripts for publication, and writing career development awards and other grants.

#### FACULTY:

Faculty members in the Program are recognized leaders in academic general internal medicine and integrative medicine. Dr. Gloria Yeh (mind-body movement) directs the Program. Other members of the core faculty include: Dr. Peter Wayne (mind-body therapies), Dr. Roger Davis (biostatistics), and Professor Ted Kaptchuk (placebo studies).

#### **ELIGIBILITY AND APPLICATION:**

MD applicants who are board-eligible or board-certified in internal medicine at the start of their first fellowship year are given priority, but physicians who are board-eligible or certified in other specialties are considered as well. We also encourage applications from PhD or other doctoral degree applicants with interests in clinical, basic or translational research that are aligned with the priorities of the fellowship program. Applicants are screened on the basis of their career goals and on the recommendations of faculty from their medical schools, residency programs, and/or doctoral programs.

Each applicant must complete an **application form**, **submit one writing sample**, **provide an updated CV/Resume**, **and have two letters of recommendation** submitted by faculty who are familiar with the applicant's qualifications. If the applicant is an MD, one of these letters must be from the Director of the current or most recent clinical training program. The writing sample may be published or unpublished scientific writing. The fellowship year begins on July 3rd. Personal interviews for those selected from the pool of applicants are generally held in October and November. Notification of acceptance usually occurs by end of November of that year.

Candidates who apply to the Program have the opportunity to learn about program components during the interview process. As part of the selection process, accepted applicants may be matched to a participating clinical institution. The primary institution typically serves as the site for the fellow's research activities, clinical practice and teaching activities.

Fellows who are accepted into the Program are then required to complete a formal application to the Harvard T.H. Chan School of Public Health prior to beginning the fellowship. In addition to the fellowship stipend, the Program pays full tuition for the summer core curriculum and, for some fellows in the Master's degree program, all the courses that are required (45 credits) for a Master's level degree at the Harvard T. H Chan School of Public Health. The first deadline for application to the Harvard School of Public Health is December 1 prior to beginning the program in July.

#### **MINORITY APPLICANTS:**

The program is particularly interested in applications from individuals from under-represented minority groups. Research projects conducted by the faculty have included those that focus on the care of minority and other underserved populations. Harvard Medical School and each of the participating sites are equal opportunity employers.

#### Applications, CVs, Two Letters of Recommendation, and a Writing Sample should be sent to:

Beth Israel Deaconess Medical Center (BIDMC) Research Fellowship Program in Integrative Medicine 1309 Beacon Street 2<sup>nd</sup> Floor Brookline, MA 02446 Tel (617)-754-1448 Fax (617)-754-1440 Attn: Integrative Medicine Fellowship Coordinator e-mail: <u>GIMfellowship@bidmc.harvard.edu</u>

# HARVARD MEDICAL SCHOOL Research Fellowship Program in Integrative Medicine For Fellowship Beginning July 3, 2023

# **APPLICATION FORM**

Type or fill out by hand (Please DO NOT USE blue ink)

## I. Personal Data

1.	Name in full: (Include middle name please)
2.	Home address:
3.	Dracont addrace (if different):
J.	Present address (if different):
4.	Telephone (daytime):
	Telephone (evening):
	Page number and ID:
	Fax number:
	E-mail:
5.	Name of spouse:
6.	In case of emergency, notify:
7.	Last 4 of Social Security Number:
8.	Date of birth:
9.	You must check <b>one</b> of the three options below to be eligible for the program:
	I am a citizen of the United States
	I am a non-citizen U.S. national: A person born in an outlying possession of the U.S. (e.g., American Samoa or
	Swain's Island) on or after the date the U.S. acquired the possession, or a person whose parents are U.S. non-citizen nationals.
	└─┘ I am a permanent resident (I-551 or I-151) alien or green card holder
10	
10.	If you are graduate of a foreign medical school (except Canada), you are <b>REQUIRED</b>
	to be certified by the Educational Council for Foreign Medical Graduates. Please
	provide certificate number and date:
	Standard Certificate Number:
	(Photocopy MUST be enclosed)
	Date of Certification:
11.	Do you have any disabilities or limitations that would prevent you from performing the
	responsibilities of this fellowship?
	Yes()No()

# II. EDUCATION, LICENSURE, AND EXPERIENCE

1.	High School		
1.	Name and location:		
	Graduation date:		
2.	College Name and location:		
	Graduation date:		
3.	Postgraduate		
	Name and location:		
	Graduation date:		
4.	Medical School		
Name and location:			
	Graduation date:		
	Honors?		
5.	Residency and Internship Training (most recent first)		
Α.	Hospital:		
	Type:		
	Location:		
	Date:		
В.	Hospital:		
	Type:		
	Location:		
	Date:		
C.	Hospital:		
Type:			
Location:			
	Date:		
D.	Hospital:		
	Type:		
	Location:		
	Date:		
6.	Fellowships (most recent first)		
A.			
/ \.			
В.			
D.			
	Subspecialty Board Certification:		
6.	If you had a previous POST-DOCTORAL Fellowship, was it funded by a National		
	Research Service Award (NRSA)? (If you are unsure, please contact the program		
	officers and ask.) You will not be eligible for this fellowship if you have already had		
	more than one year of postdoctoral NRSA funding.		
	Yes () Years funded: No ()		
L			

7.	Have your privileges at any hospital or other facility even been denied, limited, suspended, revoked or not renewed? And/or have you ever been denied membership or a renewal thereof or been subjected to disciplinary proceedings in any hospital or medical association?				
	Yes ( ) Please provide full details separately No ( )				
8. Has your license to practice medicine in any jurisdiction ever been limited, susp					
or revoked?					
	Yes ( ) Please provide full details separately No ( )				
9. Have you ever voluntarily relinquished your license?					
	Yes ( ) Please provide full details separately No ( )				
10.	0. Please provide details of national and state board examinations:				
	Date:				
	State:				
	Number:				
	Result:				
	Date:				
	State:				
	Number:				
	Result:				

# III. RESEARCH AND CAREER PLANS (You may use a separate page if additional space is needed)

1. Do you plan to take a subspecialty fellowship in the future?						
	Yes ( ) No ( )					
2. Do you plan to earn any further degrees in the future?						
	Yes ( ) No ( )					
	Please specify:					
3.	Why are you interested in the Research Fellowship Program in Integrative Medicine?					
0.						
4.	Describe your research interests in integrative medicine:					
5.	a) Describe your clinical interests in integrative medicine:					
	b) Describe your ideas for potential fellowship projects:					

6.	Describe the position you envision upon completion of this fellowship program:
7.	Describe your long-term goals:
8.	The usual time period for a Fellow to be associated with this program is three years. If you will require more or less time than that, please explain why:
9.	If you wish to provide any additional information that may be helpful to the selection committee, please add it here:

10. If you have published (articles, books, and/or monographs), please list your publications below. Indicate which publication represents your best work. You attach a separate list if one is available. Abstracts should be listed under a separate gory.				
11.	How did you hear about this fellowship program?			
	Advertisement in medical journal. Name:			
	Friend/Associate:			
	□ Other:			

# **IV. REFERENCES**

	Please arrange to have <b>two letters of reference</b> submitted. One must be from the Director of your current or most recent clinical training program. List the two referring faculty members below:
1.	Name:
	Institution:
	Title:
2.	Name:
	Institution:
	Title:
	Fellows will start at the beginning of July of each calendar year.

I attest that this information is accurate to the best of my knowledge:

Candidate signature

Date

## RESEARCH FELLOWSHIP PROGRAM IN INTEGRATIVE MEDICINE

# SELF-IDENTIFICATION FORM

Harvard University is subject to certain governmental recordkeeping and reporting requirement for the administration of civil rights laws and regulations. In order to comply with these laws, Harvard invites its trainees to voluntarily self-identify their ethnicity and race. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

# Self-Identification of Ethnicity and Race

Do you consider yourself to be Hispanic/Latino?

- Yes (A person of Cuban, Chicano, Mexican, Mexican American, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)
- No No

# In addition, please select one or more of the following racial categories to describe yourself, if applicable:

American Indian or Alaskan Native (A person having origins in any of the original peoples of North, Central or South America, and who maintains tribal affiliation or community attachment.

Asian, not underrepresented (A person having origins in any of the any of the
Asian subpopulations not considered underrepresented in the health professions
includes Chinese, Filipino, Japanese, Korean, Asian Indian, Thai, Vietnamese, or
Malaysian

- Asian, underrepresented: A person having origins in any of the Asian subpopulations considered underrepresented in the health professions includes any Asian OTHER THAN Chinese, Filipino, Japanese, Korean, Asian Indian, Thai, Vietnamese, Malaysian (*i.e., Cambodian, or Laotian*)
- Black or African-American (A person having origins in any of the black racial groups of Africa)
- Native Hawaiian or Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)
- White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

# Self-Identification for Veteran Status

As an affirmative action employer, Harvard is subject to certain federal recordkeeping and reporting requirements. In order to assist the University in complying with these requirements, we offer you the opportunity to complete this self-identification form. Submission of this information is voluntary and disclosing or declining to provide it will not subject you to adverse treatment. The information will be used in a manner consistent with federal and state laws.

Please indicate if you are a:

	Disabled Veteran : Veteran of the U.S. military who is entitled to compensation (or who but
fo	r receipt of military retired pay would be entitled to compensation) under laws administered by
th	e Secretary of Veteran Affairs, or a person who was discharged or released from active duty
be	ecause of service-connected disability

Recently Separated Veteran: Any veteran during the three- year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military

Armed Forces Service Medal Vet: Veteran who, while serving on active duty in the U.S. military, participated in a U.S. military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985

Other Protected Veteran: Veteran who served on active duty in the U.S. military during a war or in a campaign or expedition for which a campaign badge has been authorized under laws administered by the Department of Defense

Not a Veteran: None of the above	apply
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I choose not to self-identify at this time

### Self-Identification for Persons with Disabilities

In accordance with Sections 503 and 504 of the Rehabilitation Act of 1973, the provision of this information is on a voluntary basis and will be maintained in a separate location for affirmative action program use and will not be included in the personnel file of any employee for employment.

### **DEFINITION: DISABILITY STATUS**

The following are examples of some, but not all, disabilities which may be included: AIDS, asthma, arthritis, color or visual blindness, cancer, cerebral palsy, deafness or hearing impairment, diabetes, epilepsy, HIV, heart disease, hypertension, learning disabilities, mental or emotional illnesses, multiple sclerosis, muscular dystrophy, orthopedic, speech or visual impairments, or any other physical or mental impairment which substantially limits one or more of your major life activities. Please indicate if you are:

Disabled Not disabled

# Self-Identification for Persons from Disadvantaged Backgrounds

We are required to report the number of individuals applying to, admitted to, and graduated from our program who meet federal definitions for coming from "disadvantaged backgrounds" or "medically underserved communities." The provision of this information is voluntary and will not be included in the personnel file of any employee for employment.

**The definition of "Disadvantaged"** is that which is currently in use for health professions programs (42 CFR 57.1804 (c)) and includes both economic and educational factors that are barriers to an individual's participation in a health professions program. This means an individual who:

(a) is from an environment that has inhibited the individual from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession; or

(b) is from a family with an annual income below a level based on low-income thresholds according to family size, published by the U.S. Bureau of the Census, and adjusted annually for changes in the Consumer Price Index, and by the Secretary for use in health professions programs.

**"Medically Underserved community"** means an urban or rural population without adequate health care services. If you are unsure about whether your community qualifies, we can use the following geographic information to make that determination:

State: \_\_\_\_\_

County:

City / Town: \_\_\_\_\_

(Optional)

Please indicate if you believe you are from a:

Disadvantaged Background:	☐ Yes	🗌 No	Unsure 🗌
or Medically Underserved Community	: 🗌 Yes	🗆 No	